

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814
(916) 322-6333



July 23, 1979

ALL-COUNTY LETTER NO. 79-43

TO: All County Welfare Directors

SUBJECT: INDOCHINESE REFUGEE ASSISTANCE PROGRAM - UNACCOMPANIED MINORS -
OUT-OF-HOME CARE SERVICES PROGRAM FOR CHILDREN
REFERENCE:

This letter is issued to update and clarify the responsibility of County Welfare Departments relating to the provision of Child Welfare Services to children who enter this state under the Indochinese Refugee Assistance Program (IRAP).

Indochinese refugee children continue to be admitted to this country under the Indochinese Refugee Assistance Program. Placement of these children in foster care in California is made with the assistance of the State Department of Social Services and the County Welfare Departments under the Out-of-Home Care Services for Children Program.

The Policy governing the provision of services to these children continues to be that the same range of child welfare benefits and services available in foster care cases to other children in the state applies also to lawfully admitted unaccompanied Indochinese refugee minors. In the provision of services, consideration should be given for the integration of the Indochinese child with American culture through educational and social opportunities with due regard for the provision of his or her own ethnic identity. Further, any opportunity to reunite the child with family members who have escaped from Indochina should be encouraged and pursued as well as contact with his or her ethnic community.

It is inappropriate to initiate contact with the child's natural parents in Indochina because of the potential danger to the parents and therefore is not required pursuant to the exception contained within Manual Regulations 30-209.16.

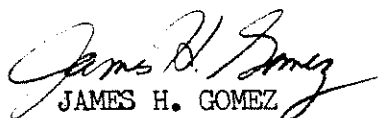
Legal responsibility shall be established for the care and maintenance of the unaccompanied minor. This action shall follow the processes normally required under Welfare & Institutions Code (W&IC) Section 300 to establish protective legal responsibility for a minor child who is without parental care and control, or the Probate Code Section 1440 to establish a guardianship for the minor.

There are additional reporting requirements for each Indochinese child in placement. The enclosed form entitled "Request for Current Information on Unaccompanied Indochinese Refugee Child" must be completed and transmitted to the State Department of Social Services, Family Supportive Services Bureau, every six months the child remains in placement under the Out-of-Home Care Services for Children Program - Manual Regulations 30-200.

Federal reimbursement continues at 100% through June 30, 1979, for the costs of services, maintenance, medical assistance, and administrative costs associated with these activities. Those children currently planned for placement in California are under the sponsorship of the United States Catholic Committee. Further instruction concerning the program will be provided as the Department receives additional information on destination and number of children assigned to California.

If you have any questions, please contact Verner Felker, Family and Children's Services Branch, 744 P Street, Room 940, Sacramento, CA 95814, at (916) 322-6333.

Sincerely,


JAMES H. GOMEZ
Deputy Director

cc: CWDA

Enc.

REQUEST FOR INFORMATION ON UNACCOMPANIED INDOCHINESE REFUGEE CHILD

NAME (LAST, FIRST, MIDDLE)		SEX
ALIEN NUMBER	SOCIAL SECURITY NUMBER	BIRTHDATE (MONTH, DAY, YEAR)
NAME AND LAST KNOWN ADDRESS OF PARENTS OR RELATIVES		
TYPE OF CURRENT PLACEMENT		
<input type="checkbox"/> Foster Family <input type="checkbox"/> Group Home <input type="checkbox"/> Institution <input type="checkbox"/> Supervised Independent Living		
NAME AND ADDRESS OF FAMILY OR INSTITUTE WHERE CHILD IS RESIDING (IF SUPERVISED INDEPENDENT LIVING, DESCRIBE)		
LEGAL CUSTODY OR GUARDIANSHIP IS HELD BY:		
NAME OF SOCIAL AGENCY		
ADDRESS		
IS CHANGE IN STATUS OF LEGAL CUSTODY OR GUARDIANSHIP PLANNED?	IF YES, WHAT CHANGE IS PLANNED? WHY?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
Briefly describe the child's current functioning in terms of relationship with adults and peers; physical health; emotional well-being; knowledge of English language; and school achievement. (Use back of form if needed.)		
Briefly describe the case plan for the child, including short-range and long-range objectives until the time it is anticipated the child will become independent. This should include information about educational and vocational plans. If problems are indicated, briefly describe the services to be provided. (Use back of form if needed.)		
NAME OF AGENCY	NAME OF PERSON COMPLETING FORM	DATE